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# LOS ANGELES COUNTY

## COMMISSION ON HIV HEALTH SERVICES

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*While not required of meeting participants, signing-in constitutes public notice of attendance. Presence at meetings is recorded solely based on sign-in sheets, and not signing-in constitutes absence for Committee members.*

*Only members of the Commission on HIV Health Services are accorded voting privileges, thus Commissioners who have not signed in cannot vote.*

### COMMISSION MEETING MINUTES May 13, 2004

Approved  
June 10, 2004

MEMBERS PRESENT	MEMBERS ABSENT	OTHERS PRESENT	OAPP STAFF PRESENT
Al Ballesteros, <i>Co-Chair</i>	Nettie DeAugustine, <i>Co-Chair</i>	Sergio Avina	John Ellis
Adrian Aguilar	Ruben Acosta	Cinderella Barrios-Cernik	Patricia Gibson
Carla Bailey	Jayne Adams	Elissa Bradley	Lela Hung
Mark Briggs	Ruth Davis	Sharon Byrd	John Mesta
Carrie Broadus	Nancy Eugenio	Judy Chabert	Vicky Nagata
Robert Butler	Anna Long	Alex Cuatro	Rene Seidel
John Caranto	Elizabeth Marte	Daryl Flynn	Cheryl Williams
Charles Carter	Alexis Rivera	Shawn Griffin	Juhua Wu
Richard Eastman	Fontaine Shockley	Daniel Gonzales	
Whitney Engeran	Vanessa Talamantes	Damen Hines	CHHS STAFF PRESENT
Gunther Freehill	Fariba Younai	Linda Johnson	James Stewart
William Fuentes		Paula Lee	Jane Nachazel
David Giugni		Luis Lopez	Craig Vincent-Jones
John Griggs		Daniel Morales	Nicole Werner
Michael Gray		Yvette Petrilleli	
Marc Hauptert		Jane Price	
Charles Henry		Natalie Sanchez	
Rebecca Johnson-Heath		Kimberly Scott	
Wilbert Jordan		Jean Shimatsu	
Marcy Kaplan		Maribel Ulloa	
Brad Land/Dean Page		Gary Vrooman	
Michael Lewis		Doris Wahl	
Andrew Ma		Jan Wise	
Edric Mendia		Patricia Woody	
Vicky Ortega		Rocio Yong	
John Palomo		Richard Zaldivar	
Mark Parra			
Chris Perry			
Dana Pierce-Hedge			
Wendy Schwartz			
Paul Scott/Richard Hamilton			
Kevin Van Vreede			
Kathy Watt			

- I. **CALL TO ORDER:** Mr. Ballesteros called the meeting to order at 9:50 a.m. Self-introductions were made.
- II. **APPROVAL OF AGENDA:** The agenda was approved. **MOTION #1: Passed by Consensus.**
- III. **APPROVAL OF MEETING MINUTES:** The April 8, 2004 meeting minutes were approved. **MOTION #2: Passed by Consensus.**
- IV. **PARLIAMENTARY TRAINING:** Mr. Stewart reminded the body of the Commission's Code of Conduct. He noted discussions should be respectful and focus on issues, not people. Regarding Public comment, he reminded all that it is

designated for non-agendized items. Public comments on agendized items are taken when the item is addressed. He added that Public Comment was for comments only, not dialogue. If the Commission wishes to address a matter brought up in Public Comment, it must be agendized for a later meeting, in accordance with the Brown Act.

V. **PUBLIC COMMENT:**

- Shawn Griffin was the first of three speakers on cuts to training. While recognizing that hard choices must be made, he related that at the various meeting, a majority of participants could not think of two challenges for HIV+ transgenders in accessing services, a majority of participants answered incorrectly that HIV was another name for an AIDS diagnosis, and a majority of those presented incorrectly agreed that testing negative for HIV antibodies may be a sign of the person's immunity to HIV. He encouraged dialogue about this issue.
- Judy Chabert, Prototypes, said that Prototypes, Asian-American Drug Abuse Program (AADAP), Asian Pacific AIDS Intervention Team (APAIT), Bienestar, Tarzana Treatment Center, and Watts Health Foundation will lose funding for all cross-training as of July 1. While they had anticipated reductions, they were not prepared for a 100% de-funding. They provide over 150 cross-training sessions to over 2,000 providers annually. They asked the Commission to review the process for the cuts and submitted a letter to that effect.
- Jeanne Shimatsu, AADAP, emphasized the importance, and cost-effectiveness, of training as a first line of contact in reducing and eliminating HIV. She submitted petitions from care service providers requesting continued training.
- Daniel Gonzales announced that Bienestar and the AIDS Healthcare Foundation (AHF) will start rapid during the month. He expressed appreciation for OAPP's assistance in the effort.
- Marc Haupt announced this would be his last Commission meeting. He thanked all the Commissioners for their work. He paid special tribute to Commission Co-Chairs Ballesteros and DeAugustine, and his Priorities and Planning (P&P) Co-Chair Land. He announced that he had opened his own consulting business. The Commission applauded his work. Mr. Ballesteros announced that the Board of Supervisors would be recognizing Mr. Haupt with a scroll at their May 18<sup>th</sup> Board of Supervisors meeting.

VI. **CO-CHAIR'S REPORT:**

- A. **Letter Endorsing Year Allocations:** Mr. Ballesteros presented a letter endorsing Year 14 allocations revised according to the Title I award. HRSA requires a letter of endorsement from the Commission Co-Chairs.
- Mr. Vincent-Jones elaborated that the letter of endorsement is a Condition of Award (COA) due by the end of May. The letter verifies that the service category allocations have been revised due to the Title I award in accordance with the Year 14 priorities and allocations the Commission set back in July 2003. Since revisions to the Year 14 allocations were still being made, the Executive Committee voted to reflect a straight 8% across-the-board cut to all services, acknowledging that such a revision covered any cuts made to date. He added that revisions to the allocations could be made and submitted to HRSA at any time. While a vote of the Commission is not required, it was decided to bring the letter and associated table forward to the Commission this year given the sensitive nature of this year's allocations revisions.
  - Ms. Broadus asked about Minority AIDS Initiative (MAI) funds. Ms. Gibson responded that HRSA requires them to be reflected in the total figure, and to be broken out as well. The second column of the spreadsheet shows the break-out, but she noted that they were also incorporated into the first column. MAI funds were reduced for Year 14 by about \$200,000. The percentages were not changed, so Medical Outpatient remains 79%, but of a reduced amount.
  - Mr. Land asked if priorities set by the Commission were maintained. Ms. Gibson replied that they were. The primary Year 14 priority change, she noted, was a reduction to Transportation and an increase to Dental. She explained that the figures appear different because the table only reflects Title I, but allocations include Title II.

**MOTION #3: Passed by Consensus.**

- B. **Year 14 Revised Allocation Decision:** Mr. Vincent-Jones explained that the Commission had voted Phase I cuts of 3% for direct services and 8% for non-direct service categories. OAPP had requested clarification on whether cuts were to reflect the 0.5% increase to Dental and resulting decrease to Transportation made in July 2003. The Executive Committee was presented three ways to address that question and chose to apply the cuts after making the July 2003 adjustments, noting that it was the most consistent with the Year 14 Priorities and Allocations that the Commission set. The accompanying table represented the application of Phase I cuts.
- Ms. Gibson noted the Title II award had been received and reflected an increase. Because Title I and II are allocated jointly, the cut has been reduced from about \$3.3M to about \$3M.

- Ms. Gibson continued that, as the July 2003 adjustments were applied before applying the revised, 3% reduction, Dental Services would receive a net increase—the only service category to receive one—and Transportation would be reduced to a greater degree than other categories.

C. **Membership Change Recommendations:**

- Mr. Engeran brought forward a motion that the proposed Commission membership structure shall stipulate that at least one of the voting member seats will be filled by a member of the Select Committee on Prevention Planning (PPC) in good standing for whom representation of the PPC is an acknowledged constituency when filling the seat.
- Further, it is acknowledged that the communication between the Commission and the PPC about this and related issues could have been more effective. In that vein, the body agreed that there ought to be institutionalized communication between the bodies, and resolved to reinstate joint Executive Committee meetings, reinvigorate the Joint Public Policy Committee (JPP) collaboration, and other measures to ensure effective, efficient and cohesive dialogue.
- In response to questions, Mr. Engeran said that the proposed membership structure includes the stipulation that seats represent various constituencies, and the motion clarifies that one such constituency must be the PPC and is brought forward to address concerns identified by the PPC.
- Mr. Vincent-Jones further clarified that one of the 39 voting seats would now necessarily be filled by a PPC member. The non-voting specified PPC seat remains in the structure.
- Ms. Watt said it was important for the bodies to stop bickering and attend to the needs of the community.
- Mr. Zaldivar, PPC member and JPP co-chair, said the PPC was strong, young, vibrant planning body that is the future of the work in the community. He felt it important to expand PPC membership on the Commission.
- Mr. Avina supports increasing PPC membership on the Commission and also felt it important to increase youth participation on the Commission. He noted there is an overall shift medical care towards prevention efforts.
- Ms. Broadus noted that the Commission had voted to merge, but the PPC had not. Ms. Watt replied that, while the PPC did not vote to merge, it had requested quarterly joint meetings.
- Dr. Jordan said prevention and care are intricately related and both aspects need to be addressed.
- Mr. Vincent-Jones clarified that previous passed motions require all Commissioners to be conversant with both care and prevention. He added that any number of PPC members could be on the Commission. The motion codifies one voting member as a minimum.

**MOTION #3a: Passed (25 ayes, 3 opposed, 2 abstentions).**

**Special Recognition of Suzie Rodriguez:** Ms. Rodriguez was presented the Founder's Award of the CAEAR Coalition to honor her as mentor to many and as co-founder of the Los Angeles County HIV Drug and Alcohol Task Force, co-founder of the national CAEAR Coalition, and one of the first co-chairs of the AIDS Regional Board. She thanked everyone for the recognition and noted it was an honor to advocate on behalf of PWH/A. She emphasized the importance of supporting clients' expression of their needs and taking their concerns to government.

VII. **DIRECTOR'S REPORT:**

- A. **New Offices/Staffing Pattern:** Mr. Vincent-Jones announced that the Commission had moved to the new offices and all Committee meetings would be held there. A map and contact information was placed in the packet.
- B. **"Maintaining EMA Relations" Training:** Emily Gantz McKay will conduct the training on Saturday, May 15<sup>th</sup>, 10:00 a.m. to 12:30 p.m. on the 8<sup>th</sup> Floor of Metroplex Wilshire. Ms. McKay, he noted, is a nationally renowned technical assistance provider and contractor who is very familiar with HRSA, Title I and Ryan White CARE Act issues. She conducts this training across the country. The Commission was able to prevail upon her to stay overnight in Los Angeles following another meeting in order to make this opportunity available to Commissioners, PPC members and OAPP staff.
- C. **MOU Workgroup:** Mr. Vincent-Jones noted the MOU is the structural document that defines the relationship between, in this case, the administrative agency (OAPP) and the planning council (Commission). Comparable documents would be requested from around the country as samples. He asked for volunteers for a work group to begin developing the MOU. Msrs. Ballesteros, Land, and Engeran, and Mss. Kaplan, Broadus and Bailey volunteered.

IX. **HIV EPIDEMIOLOGY REPORT:** There was no report.

**X. OAPP REPORT**

- Mr. Henry called attention to Title II allocation information in the packet. He complimented the State Office of AIDS, in particular Ms. Pierce-Hedge and Michael Montgomery, for their leadership in ensuring counties were not cut despite a cut in the Title II non-ADAP award.
- He also thanked the State for taking the lead in organizing the all-EMA Title I meetings. He said the State's assistance will help get better unmet need numbers for the application: a continuing problem in that area is obtaining numbers from private providers.
- Community support, Mr. Henry noted, would be pivotal in restoring the Therapeutic Monitoring Program at the State level.
- He noted that OAPP would need to hear relatively soon on plans for Phase II reductions, should they become necessary in July. Staff is already working on Phase I, while attending to the concerns of potential geographic disparities. Contracts, he added, can be augmented or reduced by 15% by administrative letters to the agencies.
- Mr. Ballesteros said the Commission had asked for information on how providers were instructed on the proper use of Medicaid and Medi-Cal dollars generated within the Ryan White programs. Mr. Henry replied he would meet with the Co-Chairs and Executive Director to clarify what information was requested. He noted he did not have authority to instruct providers on how to spend Medi-Cal dollars. They are under contract to use CARE Act funds as last resort and to ensure that they are maximizing other funding, such as Medi-Cal. Mr. Land said he recalled a discussion about ensuring appropriate eligibility standards and the need to move new patients onto other sources of funding as quickly as eligibility could be met.
- Mr. Henry noted that SB 90, a Senate bill that legislated reimbursement to local jurisdictions for unfunded mandates, has been eliminated. Court-mandated testing is one such mandate in LA County, and costs about \$300,000. It is a very efficient program, with one of the highest rates of positive returns, but will be primarily funded out of Prevention, Counseling and Testing.
- Additionally, for the last two County fiscal years, while overall Alcohol and Drug Program Administration (ADPA) funds have increased, OAPP has received \$200,000 less per year that has been kept by ADPA to staff positions. OAPP has been absorbing the cost to support HIV substance abuse housing programs. The fiscal year beginning July 1<sup>st</sup> reflects an additional \$500,000 reduction. He said OAPP could not absorb that cost. Consistent with the Commission's direction to give preference to direct services, the two training contracts which would have been up for renewal July 1<sup>st</sup> were terminated. These are the contracts that were the focus of several comments earlier during Public Comment.
- The Institute of Medicine (IOM) released its study on Ryan White financing that morning. While he had not read it in its entirety, he reviewed the Executive Summary. It is one of several reports the IOM was asked to develop on various Ryan White issues. It appears to recommend a state entitlement program modeled along MediCare lines, along with a proscribed standard of care. He said he was not sure how that would affect support services or undocumented residents. He recommended people access the report online.
- The Department of Health Services has directed Mr. Henry to replace and Medical Outpatient funds lost to Phase I cuts with Net County Cost (NCC) funds. In order to do that, he said, he would need to make deeper cuts than the Commission voted to other areas, making up approximately \$590,000. Housing and Case Management would be the most affected of those areas, as they are supported through significant NCC funding. In response to a question, Mr. Henry noted that he was not consulted nor involved in the decision. Mr. Henry said he was also concerned about prevention and capacity building, like data collection. Cuts to NCC funds could also affect those activities.
  - Mr. Engeran said he was concerned that OAPP is being directed to, essentially, hold Medical Outpatient harmless at the expense of other services and in direct contradiction to the Commission's direction. He added that many con-tracts and providers are supported through both CARE Act and NCC funding. He asserted that the Ordinance specifically identifies the Commission as advisor to the Board, he said, and its voice should be heard on the subject.
  - Ms. Broadus said the Commission's authority to set priorities was, in effect, been usurped. She added that it contradicted Federal requirements, which may well be taken into consideration while evaluating the award. Mr. Henry clarified that the \$15.9M maintenance of effort funds would still be contributed and Title I funds would be distributed as allocated by the Commission, so that the decision would not be in violation of Federal requirements. The utilization of the \$15.9M, however, would significantly affect local services so the issue would appropriately be addressed locally.
  - Mr. Land suggests meetings to frame the issue for presentation to the Health Deputies. Mr. Vincent-Jones recommended first dialogue be with Health Services. He added that, as the issue directly affects development of Phase II priorities and allocations, a next step might be to address the issue at the Priorities and Planning

(P&P0 Committee meeting the following Tuesday. It was agreed that the Commission would coordinate a meeting with Health Services. Mr. Vincent-Jones committed to crafting a letter requesting an appointment immediately after the Commission.

- Ms. Watt noted that providers do not always support the Commission process and have been known to go directly to Health Services or the Board when displeased with a Commission decision. She recommended a process to inform Health Services and the Board about Commission decisions immediately in order to reach them before others call.

#### XI. STATE OFFICE OF AIDS (OA) REPORT

- Ms. Pierce-Hedge reported that ADAP seemed to be holding in the State budget. Rebate money has been maintained separately, with all OA requests going through the Department of Finance. OA is hoping for enactment of the legislation language for a special, ongoing deposit fund which could be accessed more readily for ADAP assistance, as needed.
- The Department of Finance had denied contracts that were executed in July, but they have been overruled and the contracts will be paid. Community activism was important in getting that approval.
- Assemblyman John Laird, Santa Cruz, wants to add to the \$1M for the Therapeutic Monitoring Program. It will be going to the Conference Committee, which includes the chairs of both the Senate and Assembly Appropriations and Budget Committees.
- There will be another all-EMA Title I meeting at the end of June. Unmet need and Reauthorization generated the most interest previously, and will be the focus of the next meeting.
- In reply to Dr. Jordan's question, Ms. Pierce-Hedge said the Therapeutic Monitoring Program does not pay for resistance testing. Mr. Freehill said the Assemblyman Laird proposal would provide sufficient funds to restore that service. Dr. Jordan suggested studying outcome measure data to document its cost-effectiveness. Based on discussion at the April Commission Meeting, Ms. Pierce-Hedge had requested state laboratory data.

#### XII. PREVENTION PLANNING COMMITTEE (PPC) REPORT

The 2004 Prevention Plan will be released by the end of July. This is the prevention equivalent of the Comprehensive Care Plan. The full Needs Assessment will not be completed until August. It is meant to inform the Prevention Plan and will be added as an addendum to the Prevention Plan.

- The April 1, 2004 PPC Meeting Summary, with discussion of the 2004 Prevention Plan, was included in the packet.
- OAPP will be releasing RFPs for Prevention Counseling and Testing. They were expected to be released in four to six weeks.
- The other major topic discussed by the PPC was the improvement of communication and coordination with the Commission in order to enhance coordination of prevention and care services.
- Ms. Broadus asked about Prevention For Positives and Women at Sexual Risk (WSR). It was noted that WSR refers to both the women and their partners, as it is difficult to reach the partners through other BRGs when a significant proportion do not identify any risk behavior.

#### XII. STANDING COMMITTEE REPORTS

##### A. Finance Committee

1. ***Year 14 Planning Council Support Budget:*** Mr. Ma presented the revised Planning Council Support Budget for Commission approval.
  - Ms. Broadus asked about the level of indirect costs. Mr. Vincent-Jones responded that the Board Executive Office was providing a significantly reduced indirect cost rate of 18% compared with the 40% they normally charge for commission support services. In addition, they are providing significant services. For example, one reason it is possible to cut the staffing pattern from its first iteration of 22 positions to 9 is because the Executive Office has been providing such services as personnel, finance, information systems and even messenger mail. They have also contributed such things as equipment, purchased with last year's budget, that represent a significant savings.
- MOTION #4: Passed (22 ayes, 0 opposed, 2 abstentions).***
2. ***Financial Reports:*** Mr. Ma presented the reports. The final close-out will come in around September.

##### B. Joint Public Policy (JPP) Committee

1. ***Request for Information from HRSA:*** Mr. Engeran called attention to HRSA's letter in response to the Commission Co-Chairs' letter requesting information on the process for determining the the Title I awards. He

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said JPP would be addressing HRSA's response, which seems to raise more questions than are answered, including how the percentages are developed. A follow-up letter to HRSA would be discussed.

2. ***Municipal Communication Strategy:*** He called attention to the letter sent to all city councils and mayors in Los Angeles County to advise them of the impact of state budget issues. He noted help with the various cities would be appreciated. Pasadena had moved into committee; both Long Beach and West Hollywood were about to take it up.
3. ***Reauthorization Strategy:*** He called attention to Supervisor Knabe's amendment to include the Commission in a motion directing strategy development for the Reauthorization of the Ryan White CARE Act. JPP is suggesting that the Commission form a work group that would begin joint strategizing with OAPP, Health Services and other relevant parties.
4. ***Bathhouse Protocols:*** The overall subject was incorporated into the following.
5. ***Adult Film Industry Response:*** The Board motion, also in the packet, directs the Director of Health Services to work with Cal OSHA and local health officers to ensure safety in the adult film industry. Mr. Engeran reported, however, that the health officer collected medical files on the basis of an existing emergency. Mr. Freehill confirmed that was reported in the press, but his understanding was that the collected material comprised copies of HIV test results—not full medical files—for the first and second generation of potential exposures. Mr. Engeran requested guidance from the Commission on any JPP actions.
  - Mr. Land said he would like more information on how names came to be released when reporting should be by unique identifier.
  - Dr. Jordan felt there was an overemphasis on two adult film stars testing positive when others test positive all the time. Mr. Freehill noted that five people had so far tested positive, but that was five people since 1999, out of a talent pool of about 1,200. On the other hand, it has garnered a great deal of attention at both Federal and state levels. Laws on professional adult films differ around the country and there may be some attention to standardization, as there is a Federal age requirement for working in adult films.
  - Mr. Perry felt the adult film industry has done an excellent job of self-regulation. He was primarily concerned about confidentiality issues. Mr. Freehill noted all names disclosed were stage names.
  - Mr. Freehill said that Assemblyman Koretz will be holding a hearing on June 4<sup>th</sup>. Mr. Freehill said he was sure Health Services would be at the meeting so any advice should be prepared before then.
  - It was agreed that JPP would review the subject for possible recommendations.
6. ***Name-based vs. Unique Identifier HIV Reporting:*** Mr. Engeran called attention to a letter from Senator Feinstein to the CDC asking that a process to use data from all States, whether using codes or names, be developed.

### C. **Standards of Care (SOC) Committee**

1. ***Patients' Bill of Rights Follow-Up:*** Dr. Jordan brought forward follow-up information. A summary of a workgroup on it is in the packet. Currently, recommendations are being reviewed by the County Counsel for incorporation of the Patients Bill of Rights into contracts.

### D. **Recruitment, Diversity and Bylaws (RD&B) Committee:**

1. ***Ordinance Sunset Review:*** Mr. Butler reminded the body that the Ordinance Sunset Review is in June. He reminded Commissioners to consider whether they plan to re-apply for the Commission and which populations they might represent. Mr. Vincent-Jones reminded the body that the Commission was requesting terms be extended to bridge the transition period. Mr. Stewart noted that, when the Board makes its decision regarding the reauthorization of the body, all members will need to re-apply.
2. ***Report on Consumer Training:*** The report was deferred.

### E. **Priorities and Planning (P&P) Committee:** Mr. Land requested assistance with the Committee from the co-chairs in light of the priorities and allocations deadlines and Mr. Hauptert's resignation from the Commission.

1. ***HIPAA On-Line Training:*** The Health Insurance Portability and Accountability Act (HIPAA) deals with privacy issues, like the discussion earlier about records. The on-line course takes only an hour and concerns an area of increasing importance. P&P therefore recommends the training as a requirement for all Commissioners.  
**MOTION #5: Postponed.**
2. ***H-CAP Provider Training Presentations:*** The H-CAP provider training presentation is in the packet.

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**XIII. COMMISSIONER COMMENT:**

- Mr. Eastman reported he had dramatically improved test results after only five weeks on Fuzeon. He said he was going to AIDS Watch to help advocate for medications for all those who need it.
- Mr. Vrooman noted that only 27 people have signed up for AIDS Watch from the Los Angeles area.

**XIV. ANNOUNCEMENTS:**

- Mr. Engeran announced that Long Beach Pride would be May 22-23. Long Beach would also be sponsoring a Marriage Equity rally in front of Long Beach City Hall at 5:00 p.m.

- XV. ADJOURNMENT:** The meeting was adjourned in memory of Dia Anthony, who was remembered by Mssrs. Land, Van Vreede and Vincent-Jones. She worked at AIDS Service Center, as well as Youth Valley, and always did a highly professional, elegant, dignified job. There will be a memorial service for her the following Saturday at Mountain View Mortuary in Altadena at 2:00 p.m.

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<b>MOTION AND VOTING SUMMARY</b>		
<b>MOTION #1:</b> Approve the Agenda.	<i>Passed by Consensus</i>	<b>Motion Passes</b>
<b>MOTION #2:</b> Approve minutes of the April 8, 2004 meeting.	<i>Passed by Consensus</i>	<b>Motion Passes</b>
<b>MOTION #3:</b> Approve letter indicating that the Year 14 revised allocations are consistent with priorities and allocations set in July 2003 by the Commission.	<i>Passed by Consensus</i>	<b>Motion Passes</b>
<b>MOTION #3A:</b> The proposed Commission membership structure shall stipulate that at least one of the voting member seats will be filled by a member of the Select Committee on Prevention Planning (PPC) in good standing for whom representation of the PPC is an acknowledged constituency when filling that seat.	<i>Ayes: Aguilar, Bailey, Ballesteros, Briggs, Broadus, Caranto, Carter, Engeran, Fuentes, Giugni, Griggs, Haupt, Johnson-Heath, Jordan, Kaplan, Land, Ma, Mendia, Parra, Palomo, Perry, Pierce-Hedge, Schwartz, Talamantes, Van Vreede</i> <i>Opposed: Lewis, Scott, Watt</i> <i>Abstentions: Butler, Eastman</i>	<b>Motion Passes</b> <b>Ayes: 25</b> <b>Opposed: 3</b> <b>Abstentions: 2</b>
<b>MOTION #4:</b> Approve revised Year 14 Planning Council Support budget consistent with Year 14 Title I award, as presented.	<i>Ayes: Bailey, Broadus, Caranto, Carter, Eastman, Engeran, Fuentes, Giugni, Griggs, Johnson-Heath, Jordan, Land, Ma, Mendia, Ortega, Parra, Palomo, Perry, Schwartz, Van Vreede, Watt, Ballesteros,</i> <i>Opposed: none</i> <i>Abstentions: Butler, Haupt</i>	<b>Motion Passes</b> <b>Ayes: 22</b> <b>Opposed: 0</b> <b>Abstentions: 2</b>
<b>MOTION #5:</b> Approve new requirement that all Commission members must take Health Insurance Portability and Accountability Act (HIPAA) on-line training.	<i>Postponed</i>	<b>Motion Postponed</b>